

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	Refund G		10-22-01
O.I.P.E. CLASSIFIER	MTM	10	11-03-01
FORMALITY REVIEW	Z A	1120	11-20-01
RESPONSE FORMALITY REVIEW			

09/982587

### INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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